



**SIGN PERMIT APPLICATION**  
**CHARTER TOWNSHIP OF MERIDIAN**  
 5151 MARSH ROAD, OKEMOS, MI 48864-1198  
 BUILDING DIVISION PHONE: (517) 853-4500 FAX: (517)853-4095  
 meridian.mi.us

PLEASE PRINT

Site Address/Location		Zoning District
Applicant (If different than Contractor)		
Address of Applicant		
Telephone	Fax	Email
Contractor		Contractor License #
Address of Contractor		
Telephone	Fax	Email

**\*\*\*A SEPARATE SIGN PERMIT APPLICATION IS REQUIRED FOR EACH SIGN\*\*\***

**Type of Sign                      New    or    Replacement of Existing**

___ Freestanding	_____	or	_____
___ Wall	_____	or	_____
___ Other (describe)	_____	or	_____

**The following materials must be submitted with the application:**

- A drawing of the sign to scale showing dimensions and total square footage.
- A drawing of the support structure (base) and footing to scale showing dimensions & total height including the sign.
- A site plan to scale showing location of freestanding sign and setbacks.
- Building elevation to scale showing location of wall sign and lineal dimension of the building or tenant space
- Permit fee \$ \_\_\_\_\_    **FEE RECEIVED \$ \_\_\_\_\_**    **RECEIPT # \_\_\_\_\_**    **DATE \_\_\_\_\_**

I agree this application is only for the work described and does not grant permission for additional or related work which requires separate permits. I understand the permit may become null and void if work is not started within 180 days, or if work is suspended or abandoned for a period of 180 days at any time after work has commenced; and that I am responsible for assuring all required inspections are requested in conformance with the applicable code.

I hereby certify that the proposed work is authorized by the owner, and that I am authorized by the owner to make this application as his authorized agent. I agree to comply to all applicable laws of the State of Michigan and the local jurisdiction. All information provided on the permit application and accompanying documentation is to the best of my knowledge true and accurate.

Applicant/Contractor Signature \_\_\_\_\_ Date \_\_\_\_\_

Federal I.D Number \_\_\_\_\_ Insurance Name/Policy Number \_\_\_\_\_

**FOR OFFICE USE ONLY**

___ Existing Sign    ___ Conforming    ___ Non Conforming If Non Conforming Assessed Value of Sign \$ _____	___ Proposed Sign    ___ Conforming    ___ Non Conforming Variance Granted/Date _____
Application    ___ Approved    ___ Denied Building Official _____	Date Approved: _____ <b>Permit Number</b>

**NOTE: Separate application must be completed for Electrical permit.**

**This is not a permit and does not authorize any sign(s) to be installed or any other work or construction associated with this application until a permit has been issued.**